

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number		10/580,783			
		Filing Date		May 26, 2006			
		First Named Inventor		Yitzhak Meyuchas			
		Art Unit		-			
		Examiner Name		-			
Total Number of Pages in this Submission		6		Attorney Docket Number		CM05812EI	

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <small>(for an Application)</small> <input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition to Revive <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Executed Declaration Copy – Notice of Missing Requirements <hr/> <hr/>	Remarks <hr/>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Randi L. Karpinia	Registration No.	46,148
Signature	/Randi L. Karpinia/		
Date	March 31, 2007		

CERTIFICATE OF TRANSMITTAL/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to facsimile number or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:	
Typed or printed name	
Signature	<div style="float: right; border: 1px solid black; padding: 2px;">Date</div>